BAKER BOTTS ILLP

DETITION FOR EVECTIONAL OF TIME INDED 07 OFD 4 400/s\			1	cket Number (Optional) 392-067834.0278	
OE JO	In re Application of Fenwick				
0 0	Application Number 09/223,875		_	Filed 12/31/1998	
10 10 2 6 2004 E	For MENUING SYSTEM FOR				
PATENT & TRIBET	Group Art Unit 2611		Examiner Rueben M. Brown		
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.					
The requested extension and appropriate non-small-entity fee are as follows (check time period desired):					
One month (37 CFR 1.17(a)	(1))	RECEIV	VED	<u>\$_110</u>	
Two months (37 CFR 1.17(a)(2))		AUG 0 3 2004 \$			
Three months (37 CFR 1.17(a)(3))		Technology Center 2600 \$			
Four months (37 CFR 1.17(a)(4)) Five months (37 CFR 1.17(a)(5))		Jechnology ochron 2005			
Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is: \$ A check in the amount of the fee is enclosed. Payment by credit card. Form PTO-2038 is attached. The Commissioner has already been authorized to charge fees in this application to a Deposit Account. The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 02-4377 I have enclosed a duplicate copy of this sheet. I am the applicant/inventor assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). Attorney or agent under 37 CFR 1.34(a). Registration number if acting under 37 CFR 1.34(a). Registration number if acting under 37 CFR 1.34(a). Registration number if acting under 37 CFR 1.34(a).					
07/21/2004 	_	/wht// Signat	ure	•	
Date PTO Reg No.: 54,291	-	Robert L. Mai		d name	
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.					
Total offorms are submitted.					